

LOUISIANA BOARD OF ETHICS

Post Office Box 4368
Baton Rouge, Louisiana 70821

TIER 2.1 PERSONAL FINANCIAL DISCLOSURE STATEMENT

☒ ORIGINAL REPORT

☐ AMENDED REPORT

This Report Covers Calendar Year: 2010

☐ I currently hold an office that would require me to file a Tier 3 Personal Financial Disclosure Statement.
As such, I have completed Schedule E.

Name of Filer (print full name) EMILE FRANK LOMBARD
Address (residence) 37149 PINE ST. EXTENSION
City, State, Zip PEARL RIVER LA 70452

Name of Board/Commission (NO ABBREVIATIONS) FIRE PROTECTION DIST. NO. 22 BJ.
Date of Appointment: _____
Date Appointment Expires: _____

Name of Spouse (print full name) ARLENE SCHERINER LOMBARD
Spouse's Occupation DEPUTY ASSESSOR
Principal Business Address 520 SUITE 4D OLD SPANISH TRAIL
City, State, Zip SLIDELL, LA 70458

CHECK ONE:

- ☒ Neither I, nor any member of my immediate family, have a personal or financial interest in any entity, contract, or business, or a personal or financial relationship, that in any way poses a conflict of interest, which would affect the impartial performance of my duties.
☐ I have attached a statement describing any conflicts, and actions I am taking to resolve or avoid the conflicts.

Check all that apply:

- ☒ I have filed my state income tax return for the previous year.
☐ I have filed for an extension of my state income tax return for the previous year.
☒ I have filed my federal income tax return for the previous year.
☐ I have filed for an extension of my federal income tax return for the previous year.

NOTE: La. R.S. 42:1124.2.1 does not provide you the opportunity to request an extension in filing your personal financial disclosure statement.

Certification of Accuracy

I do hereby certify that the information contained in this personal financial disclosure statement is true and correct to the best of my knowledge and belief.

Emile F. Lombard

Signature of Filer

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Schedule A: Employment Information☐ Check if not applicable☒ Filer ☐ Spouse ☐ Full-Time ☒ Part-TimeName of Employer: SAINT TAMMANY PARISHJob Title: CHAIRMAN PLANNING & ZONING COMMISSIONJob Description: ROLE ON PLANNING & ZONING ISSUES☐ Filer ☒ Spouse ☒ Full-Time ☐ Part-TimeName of Employer: SAINT TAMMANY PARISH ASSESSORJob Title: DEPUTY ASSESSORJob Description: HOMESTEAD EXEMPTIONS, REVIEWS, & SECRETARIAL DUTIES☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Name of Employer: _____

Job Title: _____

Job Description: _____

☐ Filer ☐ Spouse ☐ Full-Time ☐ Part-Time

Name of Employer: _____

Job Title: _____

Job Description: _____

- You are required to disclose on SCHEDULE A employment information related to both you and your spouse.
- List the name of the employer; the title of the position; a brief description of the job; and disclosure as to whether the position is full-time or part-time.

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Schedule B: Income from the State, Political☐ Check if not applicable**Subdivisions, and/or Gaming Interests**☒ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: ST. TAMMANY PARISH GOVERNMENTAddress: P.O. Box 628City, State, Zip: COVINGTON, LA. 70434Amount of Income (exact dollar amount): \$ 1200.00☐ Filer ☐ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: _____

Address: _____

City, State, Zip: _____

Amount of Income (exact dollar amount): \$ _____

☐ Filer ☒ Spouse ☐ Business (where amount of interest exceeds 10%)Type of Income: ☐ State ☐ Political Subdivision ☐ Gaming Interest

Name of Business (if applicable): _____

Name of Income Source: ST. TAMMANY PARISH ASSESSORAddress: 701 N. COLUMBIA ST.City, State, Zip: COVINGTON, LA. 70433Amount of Income (exact dollar amount): \$ 14604.02

* You are required to complete SCHEDULE B if you or your spouse received income from the State, any political subdivision, and/or a gaming interest OR if a business in which you or your spouse owns an interest which exceeds 10% (either individually or collectively) received income from the aforementioned sources.

* The definitions for (and examples of) political subdivision, gaming interest, and business are found in the Instructions Section of this form.

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Schedule C: Positions - Business☐ Check if not applicable☒ Filer ☐ Spouse ☐ BothAmount of Interest (where interest exceeds 10%): 100 %Name of Business: DILEMMA? SOLUTIONS LLCAddress: 37149 Pine St. AptCity, State, Zip: Pearl River, La 70452Business Description: Problem SolverNature of Association: owner☐ Filer ☐ Spouse ☐ Both

Amount of Interest (where interest exceeds 10%): _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

☐ Filer ☐ Spouse ☐ Both

Amount of Interest (where interest exceeds 10%): _____ %

Name of Business: _____

Address: _____

City, State, Zip: _____

Business Description: _____

Nature of Association: _____

* You are required to complete SCHEDULE C if you or your spouse is a director, officer, owner, partner, member, or trustee of a business and if you or your spouse (either individually or collectively) owns an interest in a business which exceeds 10%.

* "Business" means any corporation, partnership, sole proprietorship, firm, enterprise, franchise, association, business, organization, self-employed individual, holding company, trust, or any other legal entity or person.

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Schedule D: Positions - Nonprofit☐ Check if not applicable

<input checked="" type="checkbox"/> Filer <input type="checkbox"/> Spouse
Name of Organization: <u>NORTHSHORE PELICAN FOUNDATION</u>
Address: <u>37149 PINE ST. EXTENSION</u>
City, State, Zip: <u>PEARL RIVER LA, 70452</u>
Nature of Association: <u>FUND RAISING TO HELP PEOPLE & CHARITIES</u>
Description of Organization: <u>DISTRIBUTE MONIES FOR CHARITABLE PURPOSES</u>
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse
Name of Organization: _____
Address: _____
City, State, Zip: _____
Nature of Association: _____
Description of Organization: _____
<input type="checkbox"/> Filer <input type="checkbox"/> Spouse
Name of Organization: _____
Address: _____
City, State, Zip: _____
Nature of Association: _____
Description of Organization: _____

*You are required to complete SCHEDULE D if you or your spouse is a director or officer of a nonprofit agency.

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LOUISIANA BOARD OF ETHICSPost Office Box 4368
Baton Rouge, Louisiana 70821**Schedule E: Other Offices/Positions Held**☒ Check if not applicable

Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____
Name of Office/Position:	_____

*You are required to complete SCHEDULE E if you hold any other office or position which would require you to file a personal financial disclosure statement under Section 1124.3.

* "Public Office" means any state, parish, municipal, ward, district, or other office or position that is filled by election of the voters.

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Date of Appointment: _____

Compensation: \$ ØCandidate Name: KEVIN DAVISAmount of Contribution and/or ~~Loan~~ \$ 2500.00

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

Date of Appointment: _____

Compensation: \$ _____

Candidate Name: _____

Amount of Contribution and/or Loan: \$ _____

* You are required to complete SCHEDULE F if you are appointed to a state board or commission and subject to annual financial statements as required by 42:1124.2.1 and you made a contribution in excess of \$ 1,000 to campaign of the official who appointed you.

* You are only required to disclose contributions or loans made within one year of appointment.

* "Candidate" means a person who seeks nomination or election to public office, except the office of president or vice president of the United States, presidential elector, delegate to a political party convention, United States senator, United States congressman, or political party office.

* "Public Office" means any state, parish, municipal, ward, district, or other office or position that is filled by election of the voters, except the president or vice president of the United States, presidential elector, delegate to the political party convention, U.S. Senator, U.S. Congressman, or a political party office.

* "Contribution" means a gift, conveyance, payment, or deposit of money or anything of value, or the forgiveness of a loan or of a debt, made for the purpose of supporting, opposing, or otherwise influencing the nomination or election of a person to public office, whether made before or after the election.

* "Loan" means a transfer of money, property, or anything of value in exchange for obligation to repay in whole or in part, made for the purpose of supporting, opposing, or otherwise influencing the nomination for election, or election, of any person to public office.